

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>78501</i>	<i>4/25</i>
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	<i>11</i>	<i>5/29/11</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		<i>61001</i>	<i>6/22/00</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	3-7-02
2	✓	✓	9-20-03
3	✓	✓	5-17-04
4	✓	✓	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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